



**CITY OF REDMOND**  
**Development Services Center**  
15670 NE 85th Street, 2<sup>nd</sup> Floor  
Redmond, WA 98052  
(425) 556-2473  
www.redmond.gov

**FOR STAFF USE ONLY**

DEV \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
PRJ \_\_\_\_\_ App expires: \_\_\_\_/\_\_\_\_/\_\_\_\_  
B \_\_\_\_\_ Accepted by: \_\_\_\_\_  
Type: \_\_\_\_\_ Payment method: \_\_\_\_\_

**DEMOLITION PERMIT APPLICATION**

**TYPE OF WORK**

☐ Commercial ☐ Commercial Garage ☐ Other Commercial ☐ Multi-Family ☐ Residential ☐ Other Residential ☐ Accessory Structure

Building Square Feet: \_\_\_\_\_ Number of units: \_\_\_\_\_ Existing use: \_\_\_\_\_ Public Owned: ☐ Yes ☐ No

**SITE LOCATION**

Site Address: \_\_\_\_\_ Tax Parcel Number: \_\_\_\_\_

Project Name/Tenant: \_\_\_\_\_ \*Value of Construction: \$ \_\_\_\_\_

Location/Plat name/Lot number: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Lender Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

**DETAILED DESCRIPTION OF WORK**

\_\_\_\_\_  
\_\_\_\_\_

**APPLICANT/CONTACT PERSON**

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**CONTRACTOR INFORMATION**

Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

State Contractor's License #: \_\_\_\_\_ Expiration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Redmond Business License #: RED \_\_\_\_\_

**Street Clean Up Bond to be on file with Public Works**

Notification to Public Works Utilities, Utility Billing, Fire Prevention, King County Assessor

**BUILDING OWNER OR AUTHORIZED AGENT**

I hereby certify that I have read and examined this application and know the same to be true and correct, and I am authorized to apply for this permit.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

## DEMOLITION CHECK LIST

	<u><b>Water Supply</b></u>	<b>DATE</b>
YES/NO	A. Meter to be removed. (Contact Public Works, Utilities 425-556-2840)	_____
YES/NO	B. Meter to remain and be protected.	_____
YES/NO	C. Private well (Contact King County Health Dept. 206-296-4932)	_____
	_____ to be filled and capped.	_____
	_____ to be used for other purposes	_____
	 <u><b>Sanitary Sewer</b></u>	
YES/NO	A. Sewer to be capped (Call 425-556-2723, Public Works Construction)	_____
YES/NO	B. Existing line to remain and be used by new structure.	_____
	Note: Contact Public Works Utilities for other required permits (425-556-2723)	
	 <u><b>Septic System</b></u>	
YES/NO	A. Tank to be removed (Call K.C. Health Dept. 206-296-4932)	_____
YES/NO	B. Tank to be drained and filled (Call K.C. Health Dept. 206-296-4932)	_____
	 <u><b>Electrical Supply</b></u>	
YES/NO	Electricity to be shut-off and meter removed. (Call PSE 425-885-7599)	_____
	 <u><b>Gas</b></u>	
YES/NO	Gas to be shut-off and meter removed. (Call PSE 425-447-0700)	_____
	 <u><b>Existing Foundation</b></u>	
YES/NO	A. Foundations destroyed and removed	_____
YES/NO	B. Basement - Destroyed or filled	_____
YES/NO	C. All debris removed from site – lot to be restored to original condition.	_____

## REQUIRED DOCUMENTATION

1. Anticipated demolition date \_\_\_\_\_
2. Two copies site plan (Public Works Construction w/lines as built) \_\_\_\_\_
3. Tree Removal Proposed ☐ Yes   ☐ No
4. Asbestos Abatement: Obtain approval form Puget Sound Clean Air Agency prior to proceeding with demolition.
5. If structure to be demolished is over 4000 sq. ft. - **SEPA checklist is required.**
6. Construction debris to be taken to an approved facility (King County information handout available at Permit Center)

## ABANDONMENT OF SEPTIC TANK FOR RESIDENTIAL REQUIRES THE FOLLOWING CONDITIONS TO BE MET

1. Pump tank, fill with sand, dismantle or destroy cap.
2. Letter or receipt to verify above conditions have been met by pumping services.
3. Identify current sewer/water billing account number.
4. Hauling requirements must be met if over 50 cubic yards of material are to be taken to or from site.
5. Fire protection system demo (issued through Fire Department).

**\*Value of Construction:** The value of construction shall include the prevailing fair market value of all labor, materials, and equipment needed to complete the work, whether actually paid or not.